## THE UNITED STATES PATENT AND TRADEMARK OFFICE

NT AND TRADEMARK OFFICE Center of the certify that this Applicants: Steven J. paper is being deposited & with the United States Vornsand Postal Service as first Serial No.: 09/852,883 class mail, postage prepaid, in an envelope addressed to: Commissioner for Patents, For: CLOSED LOOP P.O. Box 1450, Alexandria, TELEVISION CONTROL Virginia 22313-1450 on this SYSTEM date: Filed: May 11, 2001 November 19, 2004 Group Art Unit: 2614 Examiner: B. P. Yenke Reg. No. \$25,542

# AMENDMENT RESPONSIVE TO 09/22/04 OFFICE ACTION

Attorney for Applicants

MAIL STOP AF Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

### INTRODUCTION

Claims 31-46 remain in the application. Claims 31-46 are rejected.

#### TELEPHONE (312) 26 **SCHIFF HARDIN & WAITE**

RECEIVED

NOV 2 3 2004

### PATENT DEPARTMENT

6600 SEARS TOWER

**Technology Center 2600** 

In re application of Steven J. Vornsand

233 SOUTH WACKER DRIVE CHICAGO, ILLINOIS 60606

CONFIRMATION NO.: 5408

Serial No .:

09/852,883

GROUP ART UNIT: 2614

Filed:

May 11, 2001

EXAMINER: B.P. Yenke

For:

CLOSED LOOP TELEVISION CONTROL SYSTEM

## AMENDMENT RESPONSIVE TO 09/22/04 OFFICE ACTION

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below.

	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITION FEE
TOTAL CLAIMS	* 17	MINUS	** 20	x	( ) X 9.00 ( ) X 18.00	\$.00
INDEP. CLAIMS	* 2	MINUS	3	Х	( ) X 43.00 (X) X 86.00	\$.00
	mended to contain dependent claims y paid for.			() YES	()\$135.00 ()\$270.00 ONE TIME	

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space. Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated

month so that the period for response is extended to \_\_\_\_\_. A check in the amount of § is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

	is attached to cover the extension. This deficiency of overpayment should be attached to
	account No. 26 0175. A duplicate copy of this sheet is enclosed.
	A check in the amount of \$ is attached.
	A check for \$ accompanying IDS under 37 CFR 1.97(c) is attached
	A check for \$ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.
	The Commissioner is hereby authorized to charge Account No. 26 0175 any additional fees which may be required, credit any overpayment. A duplicate of this sheet is enclosed. When phoning re this application, please call (312) 258-5774.
I her	SCHIFF HARDIN & WAITE Customer Number: 28574)  BY  (25,542)  reby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an elope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on
	NAME OF APPLICANT'S ATTORNEY.
	SIGNATUKE November 10, 2004

DATE